

UNITED STATES DISTRICT COURT

for the

Middle District of Tennessee

JAYON MARSHALL, ET. AL.

Plaintiff

v.

ESPN, INC ET. AL.

Defendant

Civil Action No. 3:14-1945

SUMMONS IN A CIVIL ACTION

To: *(Defendant's name and address)* IMG COLLEGE D/B/A LONGHORN NETWORK
200 5TH AVENUE
7TH FLOOR
NEW YORK NEW YORK 10010

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

STEPHEN J. ZRALEK
511 UNION STREET, SUITE 1600
NASHVILLE, TENNESSEE 37219
(615) 259-5508

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

KEITH THROCKMORTON

CLERK OF COURT

Date:

OCT 7 2014

[Signature]
Signature of Clerk or Deputy Clerk

Civil Action No. 3:14-1945

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

This summons for *(name of individual and title, if any)* IME College d/b/a Longhorn Network
was received by me on *(date)* 10/16/2014.

☐ I personally served the summons on the individual at *(place)* _____
on *(date)* _____; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* _____
_____, a person of suitable age and discretion who resides there,
on *(date)* _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* _____, who is
designated by law to accept service of process on behalf of *(name of organization)* _____
on *(date)* _____; or

☐ I returned the summons unexecuted because _____; or

☒ Other *(specify)*: Certified mail # 7013 2250 0001 0539 8057

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ 0.00.

I declare under penalty of perjury that this information is true.

Date: 10/22/2014

P. Y. Gambel
Server's signature

Pamela Y. Gambel, Paralegal
Printed name and title

Bone McAllister Norton, LLC
511 Union St, Ste 1600
Server's address
Nashville TN 37219

Additional information regarding attempted service, etc:

SENDER: COMPLETE THIS SECTION

- ☐ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- ☐ Print your name and address on the reverse so that we can return the card to you.
- ☐ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

IME College of Business
Netubrk
200 5th Avenue
7th Floor
New York, NY 10010

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ Agent
[Signature]

B. Received by (Printed Name)

☐ Addressee
10/16/14

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
- ☐ Registered ☐ Return Receipt for Merchandise
- ☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number 7013 2250 0001 0539 8057
(Transfer from service label)

PS Form 3811, July 2013 Domestic Return Receipt